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Substitute for	Form 1449/PTO	0,	40	Complete if Known		
	(% \	Application Number	10/551,570	
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Sheet	1	of	2	Attorney Docket Number	5367-189PUS	

				TENT DOCUMENTS	
Examiner Initials*	Cite No. 1	Document Number Number-Kind-Code ^{2 (if known)}	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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(Use as many sheets as necessary)					Examiner Name	CROWE, David R.	
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